



Construction Industry Licensing Board of Sumter County
 7375 Powell Road Suite 115 Wildwood, FL 34785
 Phone: (352) 689-4460 Fax: (352) 689-4461

Website: www.sumtercountyfl.gov

Do not write in shaded area

For Office Use Only

Date Received:	Receipt No:
Date of Temporary Letter issued:	Meeting Date:
Competency Card Number issued:	Date Competency Card issued:
Licensing Board Comments:	

APPLICATION FOR COMPETENCY CARD

The Construction Industry Licensing Board meets at The Villages Sumter County Service Center in Wildwood 7375 Powell Rd. Rm. 102, Wildwood, FL 34785 on the first Tuesday of each month at 6:00 PM.

The completed application and required supporting documentation are due three weeks prior to the next available meeting date in order to be on that agenda. Failure to submit a complete application with supporting documentation will result in application processing delay.

PLEASE TYPE OR PRINT ALL INFORMATION

Trade Categories: Check applicable trade and whether you are requesting to sit for the exam.
 F.S. 489, Part I & II

<input type="checkbox"/> Request Exam:	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Specialty Structure
<input type="checkbox"/> General	<input type="checkbox"/> Electric	<input type="checkbox"/> Air Conditioning "A"	<input type="checkbox"/> Residential Pool/Spa
<input type="checkbox"/> Building	<input type="checkbox"/> Electric Sign	<input type="checkbox"/> Air Conditioning "B"	<input type="checkbox"/> Commercial Pool/Spa
<input type="checkbox"/> Residential	<input type="checkbox"/> Roofing	<input type="checkbox"/> Sheet Metal	<input type="checkbox"/> Limited Energy (Low Voltage)

Specialty Categories: Check applicable trade and whether you are requesting to sit for the exam.

<input type="checkbox"/> Carpentry	<input type="checkbox"/> Drywall	<input type="checkbox"/> Stucco, Lath & Plastering
<input type="checkbox"/> Concrete/Masonry	<input type="checkbox"/> Garage Door Installation	<input type="checkbox"/>
<input type="checkbox"/> Concrete Placing & Finishing	<input type="checkbox"/> Irrigation	<input type="checkbox"/>
<input type="checkbox"/> Masonry	<input type="checkbox"/> Sign (Non Electrical)	<input type="checkbox"/>

Applicant Name:						
Company Name:						
Business Address:						
City:		State:		Zip Code:		
Office Number:		Fax Number:		Cell Number:		Home Number:
E-Mail address:			Web address:			
State Registration Number:			FEIN Number			
Home Address:						
City:		State:		Zip Code:		
Citizen of the United States	<input type="checkbox"/> Yes			<input type="checkbox"/> No		

Name of Current Employer:	Telephone Number:	
Employer's Address:	Position Held:	Length of Employment

List of Counties or Cities you hold a competency card in and your competency card number.

County/City	#	County/Cities	#

Please check which of the educational/experience requirements you qualify for:

- ☐ An associate degree from an accredited two year college in an appropriate field of engineering, architecture, or building construction. Please attach a copy of official college transcript or a copy a diploma and a minimum of two (2) years of proven experience in the requested qualifications category.
- ☐ A minimum of four years of active experience as a workman who has learned the trade by serving as an apprentice and skilled workman in that particular trade for a minimum of one (1) year .

FINANCIAL RESPONSIBILITY/BACKGROUND QUESTIONS

Indicate your response by checking "Yes" or "No" to the questions below. If you answer yes to any of the questions, you must provide an explanation. The **Qualifying Agent** must answer and sign the financial responsibility.

1. Have you ever been refused a certificate of competency or other professional license or had such a license suspended or revoked in the State of Florida or any other State?	Yes		NO	
2. During the past five years have you had more than three business complaints filed against you or a business you owned or managed through a trade association, a Better Business Bureau, or other non Governmental agency?	Yes		NO	
3. Has any federal, state, county, or other governmental agency filed any business, civil, or criminal complaint against you during the past five years?	Yes		NO	
4. Have you ever failed to complete a construction contract?	Yes		NO	
5. Are there any outstanding labor or material liens against you or your company?	Yes		NO	
6. Have you been charged with or convicted of acting as a contractor without a license by any state, county, or municipality?	Yes		NO	
7. Have you, as a licensed contractor, in this or any other state been subject to any disciplinary action by state, county, or municipality?	Yes		NO	

A partner or an officer of the company must complete affidavit form below. Applicant is not to complete this section.

I hereby certify that _____ (applicant name) is legally qualified to act on behalf of the business organization seeking to be certified, in all matters connected with its contracting business. In addition, he/she has full authority to supervise construction undertaken by him/her or such business organization and that he/she will continue during this certification to be able to bid said business organization, he/she will immediately notify the Sumter County Construction Industry Licensing Board in writing within seven (7) days of such termination.

Any willful falsification of any information herein, including all supplementary pages and attachments is grounds for disqualification.

Signature of Partner/Officer (Someone other than qualifier)

State of Florida
County of _____

Subscribed and sworn to (or affirmed) before me on _____
(Date)

☐ He/She is personally know to me

☐ Or produced identification _____
Type of Identification

Notary Print

Seal

Notary Signature

Documentation of Experience

Document(s) must reflect active experience and show a minimum of four (4) years experience.

In order to verify an applicant's experience, the Board requires evidence as to active experience from practicing contractors in the field for which the applicant is applying for a General, Building, or Residential Contractor.

The contractor must include his/her certification number and attach a copy of his/her contractor's license from Department of Business and Professional Regulations (DBPR) or a copy of his/her competency card license from a county or city (not a Business Tax license), and a copy of his/her driver's license or state identification for identification purposes. All out of state contractors must submit his/her certification number and attach a copy of his/her contractor's license or a copy of his/her competency card license from a county or city (not a Business Tax License) and a copy of his/her driver's license or state identification of identification purposes.

**Alterations of any kind will void the verification form.
This is not for use as a character reference please print.**

Applicant Name:					
Address:					
City:		State:		Zip Code:	
Person verifying information					
Name:					
Address:					
City:		State:		Zip Code:	
Office Number:		Fax Number:		Cell Number:	
State Registered or State Certified License # <small>If applicable</small>		Competency Card # <small>If applicable</small>			

I, _____,

Person verifying information

certify that I have ☐ employed or ☐ sub-contracted to:

Applicant Name:		
Employment date	From: _____	To: _____

**Moreover, I know from my own direct knowledge that said applicant was employed as follows:
Describe in detail work performed. Be specific**

Signature of Person documenting experience

State of Florida
County of _____

Subscribed and sworn to (or affirmed) before me on _____

☐ He/She is personally known to me _____ (Date)

☐ Or produced identification _____

Type of Identification

Seal

Notary Print

Notary Signature

Statement of Qualifier's Responsibility

In making application to qualify as a sole proprietor, partnership, or corporation, I understand that I, as qualifying agent and/or Financial Officer, am completely responsible for the actions of said entity as they relate to its construction business. I will actively supervise all construction work and be responsible for ascertaining all such work is complete according to approved plans, applicable codes, and good construction standards. I will immediately notify the Sumter County Construction Industry Licensing Board if I sever connection with the partnership or corporation concerned in this application, or I no longer actively supervise the construction work.

Further, I understand the Sumter County Industry Licensing Board, by the authority to it in Ordinance 2009-03, holds the qualifying agent and/or Financial Officer responsible for the supervision of job sites as well as all financial aspects of the entity's construction business including, but not limited to, payment to suppliers, payment to employees, and payment of applicable federal and state taxes.

Name of Company	
Title/Position in the firm	
Qualifying Agent Name (<i>Print</i>)	
Qualifying Agent (<i>Signature</i>)	
Officer Name (<i>Print</i>)	
Officer Name (<i>Signature</i>)	

Any willful falsification of any information herein, including all supplementary pages and attachments is ground for disqualification.

Signature of Qualifying Agent		Signature of Financial Officer	
State of Florida County of		State of Florida County of	
Subscribed and sworn to (or affirmed) before me on		Subscribed and sworn to (or affirmed) before me on	
(Date)		(Date)	
<input type="checkbox"/> He/She is personally know to me		<input type="checkbox"/> He/She is personally know to me	
<input type="checkbox"/> Or produced identification :		<input type="checkbox"/> Or produced identification :	
Notary Print		Notary Print	
Notary Signature		Notary Signature	
Stamp		Stamp	



Construction Industry Licensing Board of Sumter County
7375 Powell Road Suite 115 Wildwood, FL 34785
Phone: (352) 689-4460 Fax: (352) 689-4461

Website: www.sumtercountyfl.gov

CONSTRUCTION INDUSTRY LICENSING BOARD OF SUMTER COUNTY

Submission to authorize Sumter County to complete a credit search and criminal background search at federal, state, and county levels

(1) Screening Questionnaire

Cost of Reports: _____ In State \$9.00 _____ Out of State \$15.00
(In State) (Out of State)

License Holder Information:

Name: _____
(Last) (First) (Middle)

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____

Driver License # _____ State: _____

License Holder SS# _____

Previous Residences (Previous 5 years):

Dates: _____

Dates: _____

Criminal History:

Have you ever been charged with or convicted of any criminal offense (other than minor traffic violations), or are you currently being prosecuted for any criminal offense ____ Yes ____ No

Have you ever received Pre-Trial Intervention or Deferred Prosecution for any criminal offense ____ Yes ____ No

Note: If you answered yes to either of the above questions, please provide a brief description of the charges and the outcome of the case _____

Please Note: The existence of a criminal history will not necessarily preclude you from obtaining a Certificate of Competency in Sumter County.

(2) Authorization & General Release:

I hereby authorize **Sumter County Development Services** and all of its agents (MAF Background Screening) to request and receive any information and records concerning me, including but not limited to consumer credit, criminal record history, worker's comp., driving, employment, military, civil and educational data and reports, from any individuals, corporations, partnerships, associations, institutions, schools, governmental agencies and departments, courts, law enforcement and licensing agencies, consumer reporting agencies and other entities, including my present and previous employers.

I further release and discharge **Sumter County Development Services**, all of its agents (MAF Background Screening subsidiaries and affiliates, and every employee or agent of any of them, and all individual and personal, business, private or public entities of any and all claims and liability arising out of any request(s) for, or receipt of, information or records pursuant to this authorization, or arising out of any compliance, or attempted compliance, with such request(s). I also authorize the procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable. I understand I have the right to make a written request within a reasonable period of time to MAF for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation. I further understand that MAF's reporting of information pursuant to the Fair Credit Reporting Acts is not intended to authorize or condone a prospective employer's request for and reliance upon information for purposes that are not legitimate under the Fair Credit Reporting Act or any federal or state employment laws. I acknowledge I have voluntarily provided the above information for Contractor Licensing purposes, and I have carefully read and understand this authorization.

Signature: _____ Date: _____

Print Name: _____

NOTICE OF PURPOSE OF REQUEST FOR SOCIAL SECURITY NUMBER

Sumter County collects your **social security number**, or a portion thereof, for one or more of the following purposes; classification of accounts; identification and verification; credit worthiness; billing and payments; data collection; reconciliation and tracking; payroll and benefit processing; tax reporting; new utility accounts applications; bank draft authorizations; vendor registration applications; Contractor Licensing; volunteer contracts or other volunteer assistance; **criminal background checks**; emergency transport for billing and insurance; and verification of identity.

Received by:

(Signature)

(Date)

(Print name)



Construction Industry Licensing Board of Sumter County
7375 Powell Road Suite 115 Wildwood, FL 34785
Phone: (352) 689-4460 Fax: (352) 689-4461

Website: www.sumtercountyfl.gov

(If place of business is located in Sumter County all applicants must have a zoning confirmation)

Zoning Information for Contractor Licensing

Applicant Name: _____

Business Address: _____

Mailing Address: _____

Type of Business: _____

Intended Use: _____

Onsite Storage of Materials:

☐ Yes ☐ No

Employees: (Account for only those employees that come to the business address)

☐ Yes # _____ ☐ No

Applicant signature _____

For Office Use Only

Parcel #: _____

Zoning: _____

Future Land Use: _____

☐ Approved ☐ Not Approved

Development Technician Signature _____

Date _____

CONDITIONS OF APPROVAL FOR EXEMPTION:

- The business must be conducted entirely within the enclosed living area portion of the residence.
- No sign advertising the home occupation may be placed on the property.
- No advertising, other than business cards, may be done which contains the physical location of the home occupation.
- Any increase in traffic to the property, that is attributable to the home occupation, shall be limited to two (2) trips (1 trip to and 1 trip from the premises) per day.

Application Procedures

1. To reciprocate exam scores into Sumter County, complete the attached application and supply the following: (a-l)

2. To request Sumter County to sponsor you to sit for an exam from the trade or specialty trade categories, complete the attached application and supply the following: (b-l)

a. Letter of Reciprocity: You must arrange with the reciprocal county or municipality in Florida that sponsored your original Block & Associates/Exterior/GIT LLC examinations. Please have them mail us a letter of reciprocity verifying you achieved at least 75% on those examinations. All contractors are required to take the Business & Law exam after February 1, 1993.

b. Fee: \$100.00 – Credit card, cash, check, or money order payable to: BOCC SUMTER COUNTY. Check must contain your address and phone number. Payment is non-refundable

c. Identification: Submit a clear copy of your driver's license or a state identification card with photograph.

d. Certificate of experience: Document(s) must reflect active experience and show a minimum of four (4) years experience. In order to verify an applicant's experience, the Board requires evidence as to active experience from practicing contractors in the field for which the applicant is applying for a General, Building, or Residential Contractor. The contractor documenting experience must include his/her certification number and attach a copy of his/her contractor's license or business license and a copy of his/her driver's license or state identification for identification purposes. If a contractor completes a certificate of experience and a letter of reference, the Licensing Board will consider both letters as one.

e. Three Letters of Recommendation: Letters must reflect work related experience for the trade the applicant is applying for from three different categories listed below: architect, consumer, county or city building & zoning department, engineer, lenders involved in the construction loan business, licensed contractor in any of the categories covered by this ordinance, from Sumter County or another county, material sales person, material supply business, or other persons or entities as approved by the Licensing Board and savings and loan Institution.

f. Credit Report and Financial History: The credit report must indicate all credit activity of record for the applicant and include the previous four years, and if applicable, the applicant's business. This report shall be submitted directly to the County by the applicable credit agency or bureau. Additionally, the applicant must disclose any bankruptcy proceedings in which the applicant or a business owned or controlled by the applicant has been a part of within the last ten years.

Note to Applicants: Personal credit reports must contain a FICO derived credit score to meet application requirements. It is the applicant's responsibility to ensure the credit reporting agency includes the FICO derived score on the credit report submitted to Sumter County Building Department.

g. If you are qualifying a corporation, limited liability company, or fictitious name, please submit proof of registration with the Division of Corporations.

h. Officer or Partner form: Complete the officer or partner responsibility form supplied with application, if applicable.

i. Zoning Confirmation Form: If place of business is located in Sumter County, all applicants must have a zoning confirmation.

j. Criminal Background Check: Complete the 2 page criminal background form.

k. Copy of your State License, if applicable.

l. Liability and Worker's Compensation Insurance: Proof of insurance for general, building, and electrical contractors is \$300,000 general liability and \$50,000 property damage. All other license categories require \$100,000 general liability insurance and \$25,000 property damage.

The applicant must provide proof of worker's compensation insurance as required by Florida Statutes. All Certificates of Insurance must be in the exact name of the business being qualified and list Sumter County Building Department, 7375 Powell Road Ste. 115, Wildwood, FL 34785 as the certificate holder.

4. Submit the completed application to the Sumter County Licensing Department. When the application is complete and the fee is paid, your application will be scheduled for the next Licensing Board meeting. Incomplete application will not be schedule for board meeting.

5. The day after the meeting, the applicant needs to contact the Licensing Department to start the process of obtaining a Sumter County Competency Card.

The following information will be required if a request for sponsorship was approved: An examination fee of \$125.00 is required for Sumter County to sponsor you for the exam. After the Licensing Board approves your application, there will be an additional fee charged by the testing company.

ONCE ALL OF THE APPLICABLE STEPS ABOVE ARE COMPLETED, THE LICENSE WILL BE IN "ACTIVE" STATUS AND THE APPLICANT WILL BE ABLE TO PERFORM WORK IN THEIR TRADE.

The following check list is for your use. Check each item below as you complete your application

a.	Letter of Reciprocity (Minimum score of 75% is required for both exams)
b.	Fee -\$100. (Non-refundable)
c.	Identification – copy of driver's license or identification card with photo
d.	Certificate of Experience (supplied with application)
e.	Three letter of recommendation
f.	Credit Reports – Personal and Business (sent directly from credit agency)
g.	If there or any negative remarks or bankruptcy on credit report applicant must submit a letter explaining the negative remarks. If applicant has a bankruptcy he or she must submit bankruptcy proceedings.
h.	Copy of Corporation and/or Fictitious Name paperwork
i.	Officer or Partner statement of responsibility (supplied with application)
j.	Zoning confirmation form (if applicable) (supplied with application)
k.	Criminal Background Check

FLORIDA CONSTRUCTION INDUSTRY LICENSING BOARD

Credit Reporting Agencies – For Reference Only

(This listing is **not all inclusive**. You may submit credit reports from agencies not included on this list, so long as they meet the criteria listed in 61G4-12.011(12), Florida Administrative Code.)

Sumter County cannot recommend or endorse a particular credit reporting agency. The list provided below includes the agencies that we are aware of that currently meet the Board's reporting requirements. It is provided solely as a courtesy to assist you in locating resources. The Department specifically disclaims any responsibility for the quality or cost of services provided by the agencies listed below.

Note to Applicants: Personal credit reports must contain a FICO derived credit score to meet application requirements. It is the applicant's responsibility to ensure the credit reporting agency includes the FICO derived score on the credit report submitted to Sumter County Building Department.

Brandon Network Credit Service PH: 813 685-5678	Coral Gables Supreme Credit Information Ser. PH: 305 665-3315	Crystal River USA Credit Bureau PH: 888 474-2270
Fort Meyers Merit Credit PH: 800 371-3348	Fort Walton Beach C.B. Services Credit Bureau PH: 850 862-2134	Lantana Credit Search PH: 561 791-9458
West Palm Beach Credit Check. Inc. PH: 877 616-5556	Plantation Associates Credit Reporting PH: 800 676-7640	Venice National Research Group PH: 941 488-8500
Fort Lauderdale Credit Bureau Services, Inc. dba www.elicensereport.com PH: 954 561-1400 Lumbermen's dba www.FloridaCreditReports.com PH: 800 496-4826	Naples Credit Express PH: 239 206-1049	Miami A & A Credit Corp. PH 305 252-6030
	In Balance PH: 239-774-5100	Premium Credit Bureau PH:305 468-1560
	Contracting Licensing Inc. PH: 239 774-5100	Merchant's Association PH: 305 654-6600
Jacksonville CBJ Associates Inc. PH: 904 723-5533 Lexis/Nexis PH: 678 694-4809	Licenses, Etc. PH: 239-77-1028	Premium Credit Bureau PH: 305 468-1560
	Orlando Background Search Specialists PH: 407 207-9595	Ormond Beach Dragnet Credit & Tenant Screening PH: 386 676-7733
Sarasota Check Mate PH: 941366-1819	National Association of Credit Management PH: 407 299-7491	MacData Inc. PH: 800 655-5277
License Exam Services LLC PH: 941 706-2336	Tampa Contractors Reporting Services PH: 800 487-2084	Tallahassee 1 st United CRS, Inc. PH: 850 539-8000
Pensacola Credit Bureau of Escambia Co. PH: 850 445-8541 Gulf Credit Services PH: 850 434-0884	NACM Tampa Inc. PH: 813 289-8894	Background Research Group PH: 850 539-8000